

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 5179 / 5242

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee		FEC IDENTIFICATION NUMBER ▼ C C00000935	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee AKP		Date M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 6	
Mailing Address 730 North Franklin Street Suite 404		Amount 1100.00	
City State Zip Code Chicago IL 60610		Transaction ID: SE-69996	
Purpose of Expenditure Media Production		Office Sought: <input checked="" type="checkbox"/> House State: KY <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> Presidential	
Category/ Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Geoffrey Davis		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 634312.35		2006	
Full Name (Last, First, Middle, Initial) of Payee Great American Media		Date M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 6	
Mailing Address 1010 Wisconsin Ave., NW Suite 800		Amount 45979.54	
City State Zip Code Washington DC 20007		Transaction ID: SE-69997	
Purpose of Expenditure Media Buy		Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> Presidential	
Category/ Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Gabrielle Giffords		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 276743.02		2006	
(a) SUBTOTAL of Itemized Independent Expenditures		47079.54	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Brian L. Wolff Signature		Date M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 8	